



UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY
REGION V

111 West Jackson Blvd.
CHICAGO, ILLINOIS 60604

REPLY TO ATTENT
RCRA ACTIVI

JUN 1 6 1982

Mr. R.E. Dunn
BASF Wyandotte Corp.
1700 Blaney Drive
Troy, Michigan 48084

RE: Interim Status Acknowledgement
FACILITY NAME: BASF Wyandotte Corp.

USEPA ID No. MID057007478

Dear Mr. Dunn:

This is to acknowledge that the U.S. Environmental Protection Agency (USEPA) has completed processing your Part A Hazardous Waste Permit Application. It is the opinion of this office that the information submitted is complete and that you, as an owner or operator of a hazardous waste management facility, have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. However, should USEPA obtain information which indicates that your application was incomplete or inaccurate, you may be requested to provide further documentation of your claim for Interim Status. Our opinion will be reevaluated on the basis of this information.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265, or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The printout enclosed with this letter identifies the limit(s) of the process design capacities your facility may use during the interim status period. This information was obtained from your Part A Permit application. If you wish to handle new wastes, to change processes, to increase the design capacity of existing processes, or to change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

As stated in the first paragraph of this letter, you have met the requirements of 40 CFR Part 122.23; your facility may operate under interim status until such time as a permit is issued or denied. This will be preceded by a request from this office or the State (if authorized) for Part B of your application. Please contact Arthur Kawatachi of my staff at (312) 886-7449, if you have any questions concerning this letter or the enclosure.

Sincerely,

A handwritten signature in dark ink, appearing to read "Karl J. Klepitsch, Jr.", is written over a horizontal line.

Karl J. Klepitsch, Jr., Chief
Waste Management Branch

Enclosure
cc: Director Corp. Env. Protection

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FACILITY NAME

BASF WYANDOTTE CORP

EPA ID NUMBER

MID057007478

FACILITY OPERATOR

BASF WAYANDOTTE CORP

FACILITY OWNER

BASF WAYANDOTTE CORP

FACILITY LOCATION

1700 BLANEY DRIVE
TROY MI 48084

PROCESS CODE DESIGN CAPACITY UNIT OF MEASURE

S01 1100.00000 G

OK
6/14/82

*****KEY*****				
PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE	* UNIT OF * MEASURE	CODE

STORAGE:			* GALLONS	G
-----			* LITERS	L
CONTAINER	S01	G OR L	* CUBIC YARDS	Y
TANK	S02	G OR L	* CUBIC METERS	C
WASTE PILE	S03	Y OR C	* GALLONS PER DAY	U
SURFACE IMPOUNDMENT	S04	G OR L	* LITERS PER DAY	V
DISPOSAL:			* TONS PER HOUR	D
-----			* METRIC TONS\HOUR	W
INJECTION WELL	D79	G,L,U, OR V	* GALLONS\HOUR	E
LANDFILL	D80	A OR F	* LITERS\HOUR	H
LAND APPLICATION	D81	B OR Q	* ACRE-FEET	A
OCEAN DISPOSAL	D82	U OR V	* HECTARE-METER	F
SURFACE IMPOUNDMENT	D83	G OR L	* ACRES	B
TREATMENT:			* HECTARES	Q
-----			* POUNDS\HOUR	J
TANK	T01	U OR V	* KILOGRAMS\HOUR	R
SURFACE IMPOUNDMENT	T02	U OR V	* TONS PER DAY	N
INCINERATOR	T03	D,W,E, OR H	* METRIC TONS\DAY	S
OTHER	T04	J,R,N,S,U,V	*	

BASF

RECEIVED
JAN 30 1986
U.S. EPA, REGION V
HAZARDOUS WASTE MANAGEMENT DIVISION

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
P 533 373 889

January 24, 1986

RECEIVED

JAN 31 1986

SWD - AIS
U.S. EPA, REGION V

U.S. EPA, Region V
Hazardous Waste Management
Permits Administration
230 South Dearborn Street
Chicago, Illinois 60604

Re: Notification of Hazardous Waste Activities
BASF Corporation--Troy Works
EPA ID Number--MID057007478 *Part A*

RECEIVED
JAN 31 1986
SOLID WASTE BRANCH
U.S. EPA, REGION V

Gentlemen:

On 29 November, 1985 EPA issued rules and regulations regarding the burning of waste fuel and used oil fuel in boilers and industrial furnaces (50 FR 49164). Included in these regulations were revisions to the Hazardous Waste Activity Notification forms. For all affected facilities these forms are to be completed and submitted to EPA by 29 January 1986. It is not necessary to notify individual States, as this will be done by EPA.

BASF Corporation hereby submits the enclosed notification forms pursuant to these regulations. Please direct any questions concerning this correspondence to my attention.

Very truly yours,

A. D. Gillen

A. D. Gillen
Manager
Environmental Affairs

/cir
AG-3/JOB8-13

cc: L. A. Anderson
J. Saunders (2)



CONTINUE ON REVERSE

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F 0 0 1	F 0 0 2	F 0 0 3	F 0 0 4	F 0 0 5	
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

	13		14		15		16		17		18
	23 - 26		23 - 26		23 - 26		23 - 26		23 - 26		23 - 26
	19		20		21		22		23		24
	23 - 26		23 - 26		23 - 26		23 - 26		23 - 26		23 - 26
	25		26		27		28		29		30
	23 - 26		23 - 26		23 - 26		23 - 26		23 - 26		23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31					32					33					34					35					36				
U	2	2	0		U	2	2	3																					
23	-	26			23	-	26			23	-	26			23	-	26			23	-	26							
37					38					39					40					41					42				
23	-	26			23	-	26			23	-	26			23	-	26			23	-	26							
43					44					45					46					47					48				
23	-	26			23	-	26			23	-	26			23	-	26			23	-	26							

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

[illegible]

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☒ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

NAME & OFFICIAL TITLE (<i>type or print</i>)

DATE SIGNED

Keith Fry - Director
Corporate Environmental Affairs

12/16/85

ID - For Official Use Only											
C											1/A, C
W											1

IX Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1 F 0 0 1	2 F 0 0 2	3 F 0 0 3	4 F 0 0 4	5 F 0 0 5	6
7 	8 	9 	10 	11 	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13 	14 	15 	16 	17 	18
19 	20 	21 	22 	23 	24
25 	26 	27 	28 	29 	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 U 2 2 0	32 U 2 2 3	33 	34 	35 	36
37 	38 	39 	40 	41 	42
43 	44 	45 	46 	47 	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49 	50 	51 	52 	53 	54
--------	--------	--------	--------	--------	--------

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24)

☒ 1. Ignitable
(D001)

☒ 2. Corrosive
(D002)

☒ 3. Reactive
(D003)

☒ 4. Toxic
(D000)

X Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature <i>Keith Fry</i>	Name and Official Title (type or print) Keith Fry-Director-Environmental Affairs-Chemical Division	Date Signed 1/20/86
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BASF Wyandotte Corporation

BASF

100 Cherry Hill Road
P.O. Box 181
Parsippany, N.J. 07054
201/263-5280

RECEIVED**DEC 27 1985**

Keith Fry
Director
Corporate Environmental Protection

SOLID WASTE BRANCH
U.S. EPA, REGION V

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
P35 1210962

December 23, 1985

RECEIVED**DEC 30 1985**

SWD - AIS
U.S. EPA, REGION V

U.S. EPA Region V
Hazardous Waste Management
Permits Administration
230 South Dearborn Street
Chicago, Illinois 60604

Gentlemen:

Effective January 1, 1986, BASF Wyandotte Corporation will be merged into BASF Inmont Corporation, and simultaneously the name of the surviving corporation will be changed to BASF Corporation. This merger will not affect the ultimate ownership or operational control of BASF Wyandotte Corporation's Troy Works, 1700 Blaney Drive, Troy, Michigan, EPA ID Number MID057007478. G, TSD, PA

You are hereby requested to transfer all authorizations granted to this BASF Wyandotte Corporation facility to BASF Corporation. Also enclosed is a modified Hazardous Waste Activity Notification, which is submitted as a minor modification to the document previously filed to reflect this corporate name change.

Please direct any questions concerning this correspondence to the attention of Mr. Art Gillen at the above address.

Very truly yours,

Keith Fry
Keith Fry

/cir
AG-2/JOB35-20

cc: L. A. Anderson
A. D. Gillen
J. Saunders (2)

PAF



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

MID057007478

REACKNOWLEDGEMENT

BASF WYANDOTTE CORP
1700 BLANEY DRIVE
TROY

MI 48084

INSTALLATION ADDRESS

1700 BLANEY DRIVE
TROY

MI 48084

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

PLEASE PLACE LABEL IN THIS SPACE

000161 AUG 12 80

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED
(yr., mo., & day)

MID05700747821

800812

I. NAME OF INSTALLATION

BASF WYANDOTTE CORP.

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

31700 BLANEY DRIVE

CITY OR TOWN

TROY

ST.

ZIP CODE

MI 48084

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

Same

CITY OR TOWN

6

ST.

ZIP CODE

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

WISNIEWSKI M.A. CORP. ENV. PROT.

201-263-5495

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

BASF WYANDOTTE CORP.

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)F = FEDERAL
M = NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☒ A. GENERATION☐ B. TRANSPORTATION (complete item VII)☒ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR☐ B. RAIL☐ C. HIGHWAY☐ D. WATER☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

MID057007478

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

WMI D05700 7478 21

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F001 23 - 26	2 F002 23 - 26	3 F003 23 - 26	4 F004 23 - 26	5 F005 23 - 26	6 23 - 26
7 23 - 26	8 23 - 26	9 23 - 26	10 23 - 26	11 23 - 26	12 23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 23 - 26	14 23 - 26	15 23 - 26	16 23 - 26	17 23 - 26	18 23 - 26
19 23 - 26	20 23 - 26	21 23 - 26	22 23 - 26	23 23 - 26	24 23 - 26
25 23 - 26	26 23 - 26	27 23 - 26	28 23 - 26	29 23 - 26	30 23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 U220 23 - 26	32 U223 23 - 26	33 23 - 26	34 23 - 26	35 23 - 26	36 23 - 26
37 23 - 26	38 23 - 26	39 23 - 26	40 23 - 26	41 23 - 26	42 23 - 26
43 23 - 26	44 23 - 26	45 23 - 26	46 23 - 26	47 23 - 26	48 23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49 23 - 26	50 23 - 26	51 23 - 26	52 23 - 26	53 23 - 26	54 23 - 26
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☒ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

Rudy Merriweather

NAME & OFFICIAL TITLE (type or print)

Rudy Merriweather
Works Manager

DATE SIGNED

8-7-80

BASF Wyandotte Corporation



100 Cherry Hill Road
P.O. Box 181
Parsippany, N.J. 07054
201/263-0200

November 18, 1980

Permit Contact (SEPO)
U.S. Environmental Protection Agency
230 S. Dearborn Street
Chicago, Ill. 60604

Gentlemen:

Attached is the hazardous waste permit application for the Troy, Michigan facility of BASF Wyandotte Corporation.

Although we submitted the notification form by August 18, 1980, we have still not received an EPA ID number. Repeated telephone calls to your office were unanswered.

Kindly supply our identification number as soon as possible to permit us to properly dispose of our waste.

Very truly yours,

BASF Wyandotte Corp.



M.A. Wisniewski, P.E.
Manager, Corp. Env. Prot.

MAW/jsm

ENVIRONMENTAL PROTECTION AGENCY
GENERAL INFORMATION
Consolidated Permits Program
and the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F M10057007478 T/A C 3 D

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

PLEASE PLACE LABEL IN THIS SPACE

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS

MARK 'X'

A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)

YES NO FORM ATTACHED

C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)

YES NO FORM ATTACHED

E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)

YES NO FORM ATTACHED

G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)

YES NO FORM ATTACHED

I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)

YES NO FORM ATTACHED

SPECIFIC QUESTIONS

MARK 'X'

B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)

YES NO FORM ATTACHED

D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)

YES NO FORM ATTACHED

F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)

YES NO FORM ATTACHED

H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)

YES NO FORM ATTACHED

J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)

YES NO FORM ATTACHED

III. NAME OF FACILITY

1 SKIP BASF WYANDOTTE CORP

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)

2 DIRECTOR CORP. ENV. PROTECTION

B. PHONE (area code & no.)

2 0 1 2 6 3 3 4 0 0

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 1 7 0 0 Blaney Drive

B. CITY OR TOWN

4 Troy

C. STATE

Mi

D. ZIP CODE

4 8 0 8 4

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 1 7 0 0 Blaney Drive

B. COUNTY NAME

Wayne

C. CITY OR TOWN

6 Troy

D. STATE

Mi

E. ZIP CODE

4 8 0 8 4

F. COUNTY CODE (if known)

1 6 3

VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND									
C										C									
7	2	8	2	1	(specify)					7					(specify)				
15	16	17	18	19						15	16	17	18	19					
C. THIRD										D. FOURTH									
C										C									
7					(specify)					7					(specify)				
15	16	17	18	19						15	16	17	18	19					

VIII. OPERATOR INFORMATION

A. NAME																																																												B. Is the name listed in Item VIII-A also the owner?									
BASF Wyandotte Corp.																																																												<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO									
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)																																																												D. PHONE (area code & no.)									
F = FEDERAL S = STATE P = PRIVATE																														M = PUBLIC (other than federal or state) O = OTHER (specify)																														P (specify)									
																																																												A 2 0 1 2 6 3 3 4 0 0									
E. STREET OR P.O. BOX																																																																					
P.O. Box 181																																																																					
F. CITY OR TOWN																																								G. STATE										H. ZIP CODE										IX. INDIAN LAND									
Parsippany																																								NJ										07054										Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO									

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)															D. PSD (Air Emissions from Proposed Sources)														
C	T	I													C	T	I												
9	N														9	P													
15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29
B. UIC (Underground Injection of Fluids)															E. OTHER (specify)														
C	T	I													(specify)														
9	U																												
15	16	17	18	19	20	21	22	23	24	25	26	27	28	29															
C. RCRA (Hazardous Wastes)															E. OTHER (specify)														
C	T	I													(specify)														
9	R																												
15	16	17	18	19	20	21	22	23	24	25	26	27	28	29															

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

F9: A/50

XII. NATURE OF BUSINESS (provide a brief description)

Manufacture of polyether polyol resins and systems.

F9: A/51

All correspondence regarding this permit should be addressed to the office of the Director, Corporate Environmental Protection, BASF Wyandotte Corporation, P.O. Box 181, Parsippany, N.J. 07054

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)																														B. SIGNATURE																														C. DATE SIGNED									
R.E. Dunn, Secretary																																																												11/17/80									

COMMENTS FOR OFFICIAL USE ONLY

COMMENTS FOR OFFICIAL USE ONLY																																																											

FORM 3 RCRA		U.S. HAZAR	ENVIRONMENTAL PROTECTION AGENCY US WASTE PERMIT APPLICATION Consolidated Permits Program (This information is required under Section 3005 of RCRA.)	I. EPA I.D. NUMBER									
				F M I D G 5 7 0 0 7 4 7 8 3 1									

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS
23	24 - 29	

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

- ☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

- ☐ 2. NEW FACILITY (Complete item below.)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

B. REVISED APPLICATION (place an "X" below and complete Item I above)

- ☐ 1. FACILITY HAS INTERIM STATUS

- ☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	ACRE-FEET	A	
LITERS	L	TONS PER HOUR	HECTARE-METER	F	
CUBIC YARDS	Y	METRIC TONS PER HOUR	ACRES	B	
CUBIC METERS	C	GALLONS PER HOUR	HECTARES	Q	
GALLONS PER DAY	U	LITERS PER HOUR			

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PRO- CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO- CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY
16	18	19	27	28	29	32	32
X-1	S 0 2	600	G	5			
X-2	T 0 3	20	E	6			
1	S 0 1	1100000	G	7			
2				8			
3				9			
4				10			

III. PROCESSES (continued)C. SPACE FOR ADDITIONAL PROCESS CODES
INCLUDE DESIGN CAPACITY.

OR DESCRIBING OTHER PROCESSES (code "T.

FOR EACH PROCESS ENTERED HERE

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
POUNDS..... P
TONS..... T

METRIC UNIT OF MEASURE CODE
KILOGRAMS..... K
METRIC TONS..... M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

NOTE: Photocopy this page before completing if

have more than 26 wastes to list.

S33

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE												
<div style="display: flex; justify-content: space-between;"> W 1 0 0 5 7 0 0 7 4 7 8 3 1 T/A C </div>													<div style="display: flex; justify-content: space-between;"> W DUP T/A C DUP </div>												
1 2 13 14 15													1 2 13 14 15 23 26												

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

EPA I.D. NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES											
				1. PROCESS CODES (enter)											
				2. PROCESS DESCRIPTION (if a code is not entered in D(1))											
1	0000	40	T	S 0 1											
2	4223	2000	T	S 0 1											
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															
16															
17															
18															
19															
20															
21															
22															
23															
24															
25															
26															

IV. DESCRIPTION OF HAZARDOUS WASTE

(continued)

E. USE THIS SPACE TO LIST ADDITIONAL

PROCESS CODES FROM ITEM D(1) ON PAGE 3.

833

EPA I.D. NO. (enter from page 1)

S	F	M	I	D	0	5	7	0	0	7	4	7	8	T/A	C
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

FG: A/55

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

A
FG: 56

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

42 32 550

083 10 050

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

R.E. Dunn, Secretary

B. SIGNATURE

R.E. Dunn

C. DATE SIGNED

11/17/80

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

R.E. Dunn, Secretary

B. SIGNATURE

R.E. Dunn

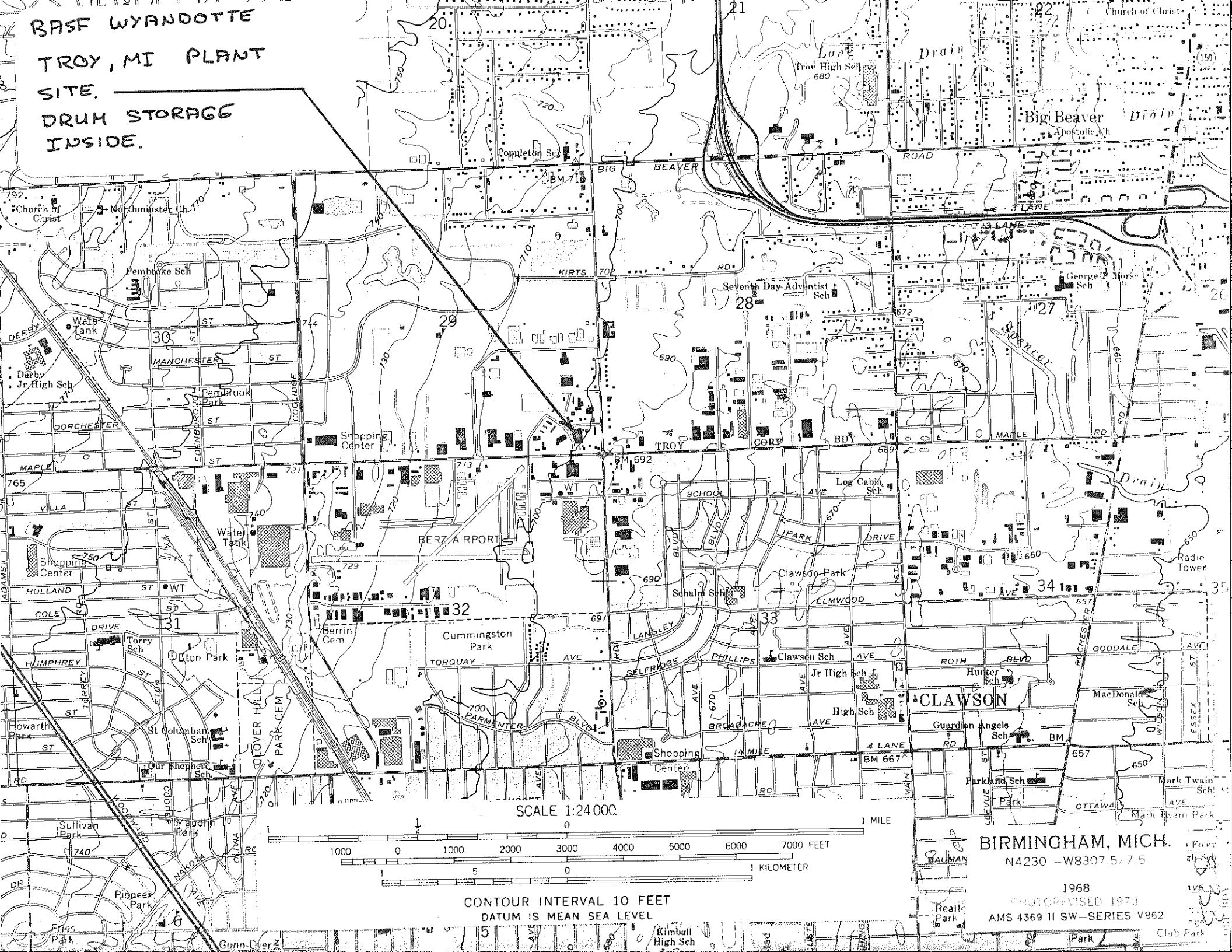
C. DATE SIGNED

11/17/80

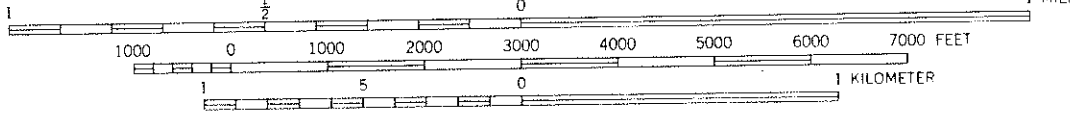
V. FACILITY DRAWING (see page 4)

535

BASE WYANDOTTE
TROY, MI PLANT
SITE.
DRUM STORAGE
INSIDE.



SCALE 1:24 000



CONTOUR INTERVAL 10 FEET
DATUM IS MEAN SEA LEVEL

BIRMINGHAM, MICH.
N4230 -W8307.5/7.5

1968
PHOTO REVISSED 1973
AMS 4369 II SW-SERIES V862

S33

S33



TROY PLANT

S33



TROY PLANT

VIEW TO NE

VIEW TO NW

PHOTOS TAKEN NOV. 1980

DRUM STORAGE INSIDE - NOT VISIBLE



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

230 SOUTH DEARBORN ST.

CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:

5HE-12

APR 24 1987

Mr. Keith Fry
BASF Corp.
1700 Blaney Drive
Troy, MI 48084

EPA ID Number: MID-057-007-478

Re: Requirements for Generators,
Marketers and Burners of
Hazardous Waste and Used
Oil Fuels

Dear Mr. Fry:

This letter acknowledges that the United States Environmental Protection Agency (U.S. EPA) has received your Notification of Hazardous Waste Activity as required by the new Waste-As-Fuel regulations. These regulations were published in the November 29, 1985, Federal Register and apply to persons who generate, market, transport, or burn hazardous waste fuel or used oil fuel.

The following information highlights the administrative requirements for persons subject to the current Waste-As-Fuel regulations promulgated on November 29, 1985, in 40 CFR (Code of Federal Regulations) Part 266, Subparts D and E.

GENERATORS

Persons Generating Hazardous Waste Fuel. Generators that send their hazardous waste to a hazardous waste fuel marketer are subject to the 40 CFR Part 262 generator standards [see 40 CFR 266.32(a)]. Generators that market their hazardous waste fuel directly to burners are subject to both the 40 CFR Part 262 standards and the hazardous waste fuel marketer requirements [see 40 CFR 266.32(b)]. Generators that are burners are also subject to 40 CFR 266.35.

Persons Generating Used Oil Fuel. Used oil generators are exempt from the current Waste-As-Fuel regulations unless they: (1) market off-specification used oil fuel directly to a burner, or (2) burn off-specification used oil for energy recovery. Generators marketing directly to a burner are subject to 40 CFR 266.43. Generators burning off-specification used oil fuel are subject to 40 CFR 266.44.

MARKETERS

Persons Marketing Hazardous Waste Fuel. Persons who market hazardous waste fuel include the following: (1) generators marketing hazardous waste fuel directly to a burner, (2) persons who receive hazardous waste from generators and produce, process, or blend hazardous waste fuel, and (3) persons who distribute but do not process or blend hazardous waste fuel. Hazardous waste fuel marketers are required to have notified U.S. EPA of their hazardous waste fuel activities, have a U.S. EPA Identification Number, and market only to persons who have notified U.S. EPA and who burn the fuel only in industrial furnaces, industrial boilers, or utility boilers. These marketers are also required to comply with manifest requirements, certification of compliance with burning standards, recordkeeping requirements, and storage standards [see 40 CFR 266.34].

Persons Marketing Used Oil Fuel. 40 CFR 266.43 describes to whom the regulations for used oil marketing apply. The same requirements for persons marketing hazardous waste fuel apply to off-specification used oil fuel marketers, except for the manifest and storage requirements [see 40 CFR 266.43].

TRANSPORTERS

Persons Transporting Hazardous Waste Fuel. Persons who transport hazardous waste fuel are subject to the 40 CFR Part 263 standards for hazardous waste transporters. These persons are required to notify U.S. EPA of their Waste-As-Fuel activities. However, they are not required to renotify U.S. EPA of their hazardous waste transportation activities if they have already done so.

Persons Transporting Used Oil Fuel. Persons who transport used oil fuel, both on-specification and off-specification, are currently exempt from the Waste-As-Fuel regulations.


BURNERS

Persons Burning Hazardous Waste Fuel. Owners and Operators of industrial furnaces, industrial boilers and utility boilers that burn hazardous waste fuel are subject to the following: (1) notification to U.S. EPA of hazardous waste fuel activities, (2) manifest requirements, (3) certification with burner standards, (4) recordkeeping requirements, and (5) storage standards. Burners must also comply with the prohibitions on use in non-industrial boilers [see 40 CFR 266.35].

Persons Burning Used Oil Fuel. Owners and Operators of industrial furnaces, industrial boilers and utility boilers are subject to the same requirements as Hazardous Waste Fuel Burners except for the manifest and storage standards [see 40 CFR 266.44].

If you have any questions concerning this letter or the Waste-As-Fuel regulations, please contact either Ms. Shirlee Brauer at (312) 886-4591, or Ms. Laura Lodisio at (312) 886-7090 or the RCRA/Superfund Hotline at (800) 424-9436.

Sincerely,


Basil G. Constantelos, Director
Waste Management Division

Enclosure

This report is for the calendar year ending December 31, 1983.
Read All Instructions Carefully Before Making Any Entries on Form

Explain your non-regulated status in the space below.

—This facility did not treat, store, or dispose of regulated quantities of hazardous waste at any time during 1983. . . . ☐

II. FACILITY EPA I.D. NUMBER

FM ID 05 70 07 47 8 1

☐ For 1983 Only ☐ Permanently
☐ Other (explain in comment section)

6303 ENTRY (OFFICIAL USE ONLY): ☐

B A S F W Y A N D O T T E C O R P O R A T I O N

3 1 7 0 0 B L A N E Y D R I V E 45

4 T R O Y M I 4 8 0 8 4
15 16 41 42 47 51
City or Town State Zip Code

15 16 45
Street or Route number

15 16 41 42 47 51
City or Town State Zip Code

2 K O N E V A L K E N N E T H C
15 16
Name (last and first)

201-263-5495
46 55
Phone No. (area code & no.)

\$

16	19	3	604

 \$

25	28	31

B. Cost Estimate for Post Closure Monitoring and Maintenance (disposal facilities only)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature of Authorized Representative

Date Signed _____

ENVIRONMENTAL PROTECTION AGENCY

Facility Biennial Hazardous Waste Report for 1983 (cont.)

This report is for the calendar year ending December 31, 1983.

Date rec'd: _____ Rec'd by: _____

IX. FACILITY'S EPA I.D. NO.

1 A C

E M I D 0 5 7 0 0 7 4 7 8 1
1 2 13 14 15

XI. GENERATOR NAME (specify generator from whom all wastes on this page were received)

ON-SITE ☒

XII. GENERATOR ADDRESS

X. GENERATOR'S EPA I.D. NO.

G
16 28

XIII. TOTAL WASTE IN STORAGE ON DECEMBER 31, 1983 (complete this section only once for your facility)

S01 1 4 0 0 0 P S02 S03 S04 S05
AMOUNT OF WASTE UOM AMOUNT OF WASTE UOM AMOUNT OF WASTE UOM AMOUNT OF WASTE UOM AMOUNT OF WASTE UOM

XIV. WASTE IDENTIFICATION

Sequence #	Line #	A. Description of Waste	B. EPA Hazardous Waste No. (see instructions)	C. Handling Method	D. Amount of Waste	E. Unit of Measure
1	1	Wastewater	D 0 0 2 33 36 37 40 41 44 45 48	S O 1 49 51 52	1 4 0 0 0	P 60 61
	2					
	3					
	4					
	5					
	6					
	7					
	8					
	9					
	10					
	11					
	12					

XV. COMMENTS (enter information by section number—see instructions)

Tear out here

BASF Wyandotte Corporation



100 Cherry Hill Road
P.O. Box 181
Parsippany, N.J. 07054
201/263-5280

Keith Fry
Director
Corporate Environmental Protection

Certified Mail
P35-1215190
Return Receipt

February 23, 1984

RCRA Activities
EPA Region V
PO Box A-3587
Chicago, IL 60690

Enclosed is the completed 1983 Facility Annual Hazardous Waste Report for BASF Wyandotte Corporation's Troy, Michigan Facility with EPA ID Number MID 057007478.

If there are any questions, please contact Ken Koneval at 201-263-5495.

Very truly yours,

BASF WYANDOTTE CORPORATION

A handwritten signature in cursive script that reads "Keith Fry".

Keith Fry

KCK/mjc
enclosure

This report is for the calendar year ending December 31, 1983.
Read All Instructions Carefully Before Making Any Entries on Form

Explain your non-regulated status in the space below.

This facility did not treat, store, or dispose of regulated quantities of hazardous waste at any time during 1983. ☐

II. FACILITY EPA I.D. NUMBER

☐ For 1983 Only ☐ Permanently
☐ Other (explain in comment section)

C303 ENTRY (OFFICIAL USE ONLY): ☐

B A S F | W Y A N D O T T E | C O R P O R A T I O N | 30 69

[illegible]

4 T R O Y															M I 4 8 0 8 4				
15 16															41 42 47 51				
City or Town															State Zip Code				

5 _____ 45
15 16
Street or Route number

2 K O N E V A L I K E N N E T H C 4
15 16
Name (last and first)

201-263-5495 \$ 16 19 3 604 \$ 25 28 31

B. Cost Estimate for Post Closure Monitoring and Maintenance (disposal facilities only)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Date Signed _____

Facility Biennial Hazardous Waste Report for 1983 (cont.)

This report is for the calendar year ending December 31, 1983.

Date rec'd: _____ Rec'd by: _____

XI. GENERATOR NAME (specify generator from whom all wastes on this page were received)

IX. FACILITY'S EPA I.D. NO.

T/A C

ON-SITE ☒F M I D 0 5 7 0 0 7 4 7 8 1
1 2 13 14 15

XII. GENERATOR ADDRESS

X. GENERATOR'S EPA I.D. NO.

G
16 28

XIII. TOTAL WASTE IN STORAGE ON DECEMBER 31, 1983 (complete this section only once for your facility)

S01 AMOUNT OF WASTE UOM S02 AMOUNT OF WASTE UOM S03 AMOUNT OF WASTE UOM
 S04 AMOUNT OF WASTE UOM S05 AMOUNT OF WASTE UOM

XIV. WASTE IDENTIFICATION

Sequence #	Line #	A. Description of Waste	B. EPA Hazardous Waste No. (see instructions)	C. Handling Method	D. Amount of Waste	E. Unit of Measure
29	32	Waste Corrosive Liquid (Contains Isocyanates)	D 0 0 2 33 36 37 40 41 44 45 48	S 0 1 49 51 52	1 4 0 0 0 60	P 61
	1					
	2					
	3					
	4					
	5					
	6					
	7					
	8					
	9					
	10					
	11					
	12					

XV. COMMENTS (enter information by section number—see instructions)

Tear out here

BASF Wyandotte Corporation



100 Cherry Hill Road
P.O. Box 181
Parsippany, N.J. 07054
201/263-5280

Keith Fry
Director
Corporate Environmental Protection

Certified Mail
P35 1210691
Return Receipt Requested

February 28, 1984

RCRA Activities
EPA Region V
PO Box A-3587
Chicago, IL 60690

Gentlemen:

Enclosed is the completed 1983 Facility Biennial Hazardous Waste Report for BASF Wyandotte Corporation's Troy, Michigan Facility with EPA ID Number MID 057007478.

If there are any questions, please contact Kenneth Koneval at 201-263-5495.

Very truly yours,

BASF WYANDOTTE CORPORATION


Keith Fry

KCK/mjc
enclosure